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STATE OF MICHIGAN
DEPARTMENT OF AGRICULTURE
LANSING

DAN WYANT
DIRECTOR

DATE: June 2, 2003

TO: All Local Health Departments
Attn: Director of Environmental Health/Chief Sanitarian

FROM: Thomas E. Crook, Manager
Food Service Sanitation Section

A handwritten signature in black ink, appearing to read "Tom Crook".

SUBJECT: Reduced Inspection Frequency – Low Risk Establishments; Vending Machine Locations

The "Criteria for Changing Inspection Frequency" sent to all local health departments on March 25, 2002 is hereby rescinded. The inspection frequencies allowed in this memorandum and in the Emergency Risk Based Inspection Schedule represent MDA's current position on reduced inspection frequency requirements.

• **Low Risk Establishments**

The 2004 MPR Workgroup has recommended that the Michigan Department of Agriculture (MDA) grant local health departments authority to reduce the inspection frequency to one (1) inspection every 12 months for those food service establishments that primarily prepare and serve non-potentially hazardous food and may also offer one or two potentially hazardous food items that meet the following limitations:

- A) Potentially hazardous food items are manufactured in another licensed food establishment.
- B) Potentially hazardous food handling is limited to one or more of the following: rethermalization, hot/cold holding, simple assembly, service.
- C) All potentially hazardous food leftovers are discarded.
- D) Single service tableware is provided for customer use.

Some examples of low-risk food service establishments that may qualify for a reduced inspection frequency include:

- A) A movie theater that prepares and serves popcorn, soft drinks, nacho chips, and hot dogs.
- B) An office building snack shop that sells prepackaged food items and offers commercially prepared soup that is reconstituted and held hot / offers slices of pizza from a whole pizza prepared at another licensed food service establishment.
- C) A bar that primarily serves beverages and reheats frozen fully cooked food items (i.e. frozen burritos, poppers, buffalo wings, potato skins) that have been prepared in another licensed food establishment for immediate service.
- D) Cocktail lounges, coffee shops, nut kiosks, juice bars, pretzel shops, donut shops, etc that only serve non-potentially hazardous food items.

It is no longer necessary to develop a written policy and procedure for MDA approval. All local health departments are hereby granted authority to reduce the inspection frequency for the described low-risk establishments to one inspection every twelve months. The authority for reducing frequency is derived from section 3125 of the Michigan Food Law 2000.

For accreditation program auditing purposes, MDA needs to know which establishments have been identified as being qualified for reduced frequency. It is not necessary to compile an inventory. On the inspection report from, there is a box titled "Inspection Type". Simply write "Reduced Frequency" in the box area on the last inspection report in the file and on each report completed thereafter.

- **Vending Machine Locations**

Vending machine locations may be inspected at one of the following frequencies:

- A. All vending machine locations are inspected once every six months.
- B. One-third of each operator's vending machine locations are inspected each year. Every vending machine location is inspected over a three-year period.
- C. One-tenth of each operator's vending machine locations are inspected every six months. Every vending machine location is inspected over a five- year period.

For accreditation program auditing purposes each health department must maintain a vending machine location policy document stating which inspection frequency option is being used.

You may contact me at (517) 241-0933 if you have any questions.

Emergency Risk Based Inspection Schedule

Food Service Sanitation Section
Michigan Department of Agriculture
6/2/2003

Background:

The Michigan Food Law 2000, Section 3123 requires the regulatory authority to inspect a food service establishment at least once every six months. The regulatory authority is required to inspect a food service establishment, operating nine months or less, at least once during the period of operation.

Section 3125 of the food law allows MDA to develop criteria to reduce the frequency of inspection for individual food service establishments provided the reduction does not affect food service sanitation practices within the food service establishment.

Local health department conformance with inspection frequency requirements is evaluated under the Michigan Local Health Accreditation Program, Section H, Food Service Sanitation. A local health department must meet all minimum program requirements to achieve "Fully Accredited" status.

Purpose:

It is the position of the Michigan Department of Agriculture that food service inspections should be conducted at the frequency required by Section 3123 of the Food Law. However, the department also recognizes that emergency conditions may develop, beyond the local health department's control, which limit resources and prevent full compliance. The purpose of the Emergency Risk Based Inspection Schedule (ERBIS) is to provide a strategy for using limited resources most efficiently. A local health department's accreditation status will not be jeopardized if ERBIS is followed.

Emergency Conditions:

The following are examples of emergency conditions that limit a local health department's ability to conduct inspections at the required schedule:

- ◆ Homeland security incidents; public health crisis such as West Nile Virus and beach closings; and other unplanned urgent situations that temporarily draw staff away from the food service sanitation program.
- ◆ Loss of staff due to turnover, illness, retirement, and death.

- ◆ Budget cutbacks that prevent vacant positions from being filled or result in layoffs.

Principle of the Risk Based System:

The rationale is to target more resources to those food service establishments that have the potential for posing the highest risk of foodborne illness while applying the least amount of resources to those establishments that pose minimal risk. Under the ERBIS system, high-risk establishments are inspected at the frequency required by law and low-risk establishments are inspected at a reduced frequency.

Risk Categorization:

The Risk Type for a food service establishment may be determined by comparing an establishment to one or more of the characteristics in each category. Risk Type X establishments pose the lowest risk while Risk Type Z establishments pose the highest.

Risk Type	Risk Category Characteristics	Frequency
X	Preparation and/or service of non-potentially hazardous food only	One inspection every 18 months
Y	<ol style="list-style-type: none"> 1. Limited preparation of potentially hazardous foods 2. Limited menu. Ingredients require minimal assembly. 3. Most products are cooked/prepared and served immediately. 4. Hot and cold holding is restricted to single meal service. 5. Preparation processes requiring cooking, cooling, and reheating are limited to one or two potentially hazardous foods. 	One inspection every 12 months
Z	<ol style="list-style-type: none"> 1. Extensive handling of raw products. 2. Preparation processes require cooking, cooling, and reheating of potentially hazardous foods. 3. A variety of processes require hot and cold holding of potentially hazardous foods. 4. Advanced preparation for next day service. 5. Population served is immunocompromised. 6. Food processing activities include smoking, curing, reduced oxygen packaging, for extended shelf life. 	One inspection every six months

Examples:

X – cocktail lounge, coffee shop, theater, donut shop, nut kiosk, juice bars that only prepare and serve nonpotentially hazardous food.

Y – Fast food operations (hamburger, pizza, chicken, fish, sub sandwiches, pasta, etc). Full service operations primarily utilizing commissary/supplier prepared food. Full service operations primarily using cook-and-serve procedures. Buffet style operations that change the entrees each meal period, do not save leftovers, and do not prepare more than one or two items in advance of the day of service.

Z – Upscale supper clubs, some catering operations, and independently owned establishments specializing in home-style cooking.

Invoking ERBIS

All local health departments are authorized to use ERBIS. No special approval is required. Each local health department has the authority to decide when emergency conditions exist warranting the implementation of ERBIS.

However, MDA needs to have the ability to audit the inspection frequency element of the food service sanitation program during accreditation reviews. In order to avoid accreditation review problems, local health departments must notify MDA in writing within 30 days after the date ERBIS has been implemented. The notice must include a description of the condition(s) constituting the emergency and a summary of the steps that are being taken to resolve the conditions. The notice must be updated annually.

For auditing purposes, the minimum time period for invoking ERBIS is in one-year blocks. A local health department may elect to resume normal frequency before a year has expired. The MDA accreditation audit, however, will evaluate the 12-month time period from the date ERBIS was invoked as though all inspections were conducted under the ERBIS system.

Risk Category Identification

For ERBIS program auditing purposes, MDA needs to know the risk category assigned to each establishment. It is not necessary to compile an inventoried list for each type. On the inspection report form, there is a box labeled “Inspection Type”. Simply write either “Type X”, “Type Y” or “Type Z” in the box area on the last inspection report conducted.

Focused Inspections

A local health department on ERBIS may want to conduct an abbreviated focused inspection in addition to the required full inspection(s). For program auditing purposes, the words “focused inspection” must be written in the “Inspection Type” box on the inspection report form. This will let the MDA program auditor know that the inspection was conducted for a specific purpose (i.e. identify critical violations only, focus on the CDC identified risk factors, follow-up on a problem area, etc)

Public Health Considerations

The local health department should maintain inspection frequency required under Section 3123 for those Risk Type X and Y establishments that have a chronic or continuous history of non-compliance.

Severe Emergencies

A local health department may find itself under a severe emergency situation that even prevents compliance with ERBIS. A local health department may submit a plan to MDA that includes a risk assessment, workload planning, justification for the reduction in inspection services, implementation procedures, and start / stop dates for review and approval. MDA should be contacted for assistance before work on the plan begins.